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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6) AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Offering of options to purchase shares of Common Stock, \$.001 par value per share, per Stock Option/Stock Issuance Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 □ Rule 506 □ Sectio Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.) Egenera, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephilin 165 Forest Street, Marlboro, MA 01752 508 858-2600 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Manufacturer of computer hardware and software Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month l'ear 03 00 Actual or Estimated Date of Incorporation or Organization: Actua! ■ Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

## GENERAL INSTRUCTIONS

### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Beneficial Owner Executive Officer □ Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Brownell, Vern Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Zolot, Kenneth **Business or Residence Address** (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Carmi, Ilan Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Collatos, William **Business or Residence Address** (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 ☐ Promoter □ Director Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Volpe, Louis Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Beneficial Owner ☐ Executive Officer Promoter General and/or Check Box(es) that Apply: □ Director Managing Partner Full Name (Last name first, if individual) Austin Ventures VIII, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 701 N. Brazos Street, Suite 1400, Austin, TX 78701 Check Box(es) that Apply: Beneficial Owner ☐ Director ☐ General and/or ☐ Promoter ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Credit Suisse First Boston Equity Partners, L.P. (Number and Street, City, State, Zip Code) Business or Residence Address C/o Credit Suisse First Boston, Eleven Madison Ave, New York, NY 10010

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) **Kodiak Venture Partners** Business or Residence Address (Number and Street, City, State, Zip Code) 35 Forest Ridge Road, Suite 200, Concord, Massachusetts 01742 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Spectrum Equity Investors IV, L.P. **Business or Residence Address** (Number and Street, City, State, Zip Code) One International Place, 29th Floor, Boston, Massachusetts 02110 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Manca, Peter Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Sheehan, Thomas F. Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Beneficial Owner General and/or Check Box(es) that Apply: □ Promoter □ Director Managing Partner Full Name (Last name first, if individual) Sprachman, Benjamin Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Deborah G. Miller Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Michael Thompson Business or Residence Address (Number and Street, City, State, Zip Code) C/o Egenera, Inc., 165 Forest Street, Marlboro, MA 01752

				B. INF	ORMATIC	N ABOU	OFFERI	NG				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										No X		
					Appendix,							
2. What is the	minimum	investment					-				\$ N/A	
2. What is the	, minimum	mvestment	diat will be	accepted	Tolli aliy iik	arviduar		•••••••				No.
3. Does the offering permit joint ownership of a single unit?											☒	
4. Enter the information agent of a broad to be listed are Full Name (L.	for solicita ker or deale associated	tion of pure er registered d persons of	hasers in co I with the S such a bro	onnection w EC and/or	ith sales of with a state	securities i or states, li	n the offeri st the name	ng. If a per of the brok	son to be li er or deale	sted is an a	ssociated than five (	person or
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	code)		··				
Name of Asso	ciated Bro	ker or Deal	er									
States in White		Listed Has S or check ind									П	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ciated Bro	ker or Deal	er									
States in Whi									<del></del>			
(Check ".	All State" c	or check ind [AZ]	ividual Stat	es)[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	 [GA]	□	All States [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L					<u> </u>							
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Business or R	acidanaa A	ddress (No	mber and S	treet City	State 7in C	'ode)				-		
Dusiness of N	esidelice A	iduless (14u	inder and S	ucci, City,	State, Zip C	oue)						
Name of Asso	ociated Bro	ker or Deal	er	- 11		<del></del>						
States in Whi		Listed Has S			Solicit Purc	hasers					🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
<ol> <li>Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box      and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.</li> </ol>		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>-0-</u>	\$0
Equity	\$ -0-	\$ <u>-0-</u>
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	\$ <u>1,911,635</u> *	\$0-*
Partnership Interests	\$ <u>-0-</u>	
Other (Specify:)	\$ -0-	
Total		\$0-*
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$ <u>-0-*</u>
Non-accredited Investors	0-	\$0
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 3, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of	Dollar Amount
Rule 505	Security	Sold
		\$ <u>n/a</u>
Regulation A	n/a	
Rule 504	n/a	\$ <u>n/a</u>
Total	<del></del>	\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		,
Transfer Agent's Fees		<b>⊠</b> \$0
Printing and Engraving Costs		<b>□</b> \$ -0
Legal Fees		<b>S</b> \$ <u>-0-</u>
Accounting Fees		⊠ \$0
Engineering Fees		<b></b> \$0
Sales Commissions (specify finders' fees separately)		<b>⊠</b> \$0
Other Expenses (identify)		<b>⊠</b> \$ <u>-0-</u>

\$<u>-0-</u>

<sup>\*</sup> The securities that are the subject of this filing are options to purchase shares of common stock at an exercise price of \$0.22 per share, the current per share fair market value of such stock. The aggregate offering price reflected in this filing assumes the exercise of all such options. The amount already sold is stated as zero in this filing because Egenera, Inc. will actually receive payment only as and when the options are exercised. It is expected that these options will be exercised, if at all, not immediately, but rather in the future.

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND USE	OF PI	ROCEEDS				
1 and total expenses furnished in response	offering price given in response to Part C - Question to Part C - Question 4.a. This difference is the			\$ <u>1, 911,635</u>			
estimate and check the box to the left of the e	oss proceeds to the issuer used or proposed to be mount for any purpose is not known, furnish an stimate. The total of the payments listed must equal orth in response to Part C - Question 4.b above.						
the adjusted gross proceeds to the issue, set in	of the first temperature of the first temperat		Payments to Officers, Directors, & Affiliates	Payments To Others			
Salaries and fees		$\boxtimes$	\$	⊠ \$			
Purchase of real estate			\$				
Purchase, rental or leasing and installatio	Purchase, rental or leasing and installation of machinery and equipment						
Construction or leasing of plant buildings	and facilities		\$	⊠ \$ ⊠ \$			
Acquisition of other businesses (including offering that may be used in exchange for	g the value of securities involved in this the assets or securities of another	⋈	\$	⊠ \$			
			-	□ \$			
			\$				
- ·			\$	<b>■</b> \$ <u>1,911,635</u>			
Other (specify):		X	\$	⊠ \$			
		⋈	\$	⊠ \$			
Column Totals	$\boxtimes$	\$	<b>■</b> \$ <u>1,911,635</u>				
Total Payments Listed (Column totals ad	<b>⊠</b> \$ <u>1,911.635</u>						
	D. FEDERAL SIGNATURE						
following signature constitutes an undertaking b	ed by the undersigned duly authorized person. If this not y the issuer to furnish to the U.S. Securities and Exchang to any non-accredited investor pursuant to paragraph (b)(	ge Com	mission, upon				
Issuer (Print or Type) Signature			Date O				
Egenera, Inc.	Thomas f. Sheethar		May $\mathcal{S}$ ,	2002			
Name of Signer (Print or Type)	Title of Signer (Pfint or Type)						
Thomas F. Sheehan	Chief Financial Officer						

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)